



METROPOLITAN WATER RECLAMATION DISTRICT OF GREATER CHICAGO Industrial Waste Division / Enforcement Section

RD-115

Continued Compliance Report

	FACILITY ID			ATINIC WO	DIE INC		11138-5
a.	Facility Name:			ATING WO		Facility DA Number:	
	Address:	34	10 NORTH	RIVER RO	DAD	DA Effective Date:	02/15/2012
	City:	FRANK	LIN PARK	Zip Code:	60131	DA Expiration Date:	02/14/2017
	Telephone:	847-678	3-0200 FAX	_: 847-678	-0758 _{Fed}	eral Tax ID Number:	36-2106921
	Website:		E	ELMONTP	LATINGWO	ORKS.COM	
	Facility Contac	t Person:			MARK		
	P	RESIDE	ENT	847-67	8-0200	MTONI93713	@AOL.COM
		TITLE		TELEPHONE /	EXTENSION	E-MAIL A	DDRESS
b.	Facility is regul	lated as an S	IU: 🔲 For havi	ng a non-regulate	d process discha	rge greater than 25,000 g	gallons per day.
			🗵 For havi	ng a categorically	regulated proces	s discharge.	
			☐ For anot	ther reason (i.e. sp	oecial type of indu	ustry).	
Ç.	Reporting Peri	00.	28/2013 KONTH/DAY/YEAR	04/27/2 END MONTH/	Ke	eport Due Date:	04/27/2014 MONTH/DAY/YEAR
	NATURE OF	WASTEWA	ATER FLOWS:				
a.	Provide the tot	. 1 6 9%		والمراجعة والمسترين والمسترين والمسترين	nama flaw rates d		_
		ai facility dail	y average and da	ny maximum discr	large now rates o	luring the reporting perio	d:
	Note: For any	-	-	-		nuring the reporting peno shall be provided.	d:
	Note: For any Flow Typ	estimated di	-	, a verifiable basis <u>GPD)</u>	for the estimate Maximum Fl		Type of Discharg
	•	estimated di pe <u>Ave</u>	ischarge flow rate erage Flow Rate (131,450	, a verifiable basis GPD) Measure Estimate	for the estimate Maximum Flood 197	shall be provided. ow Rate (GPD) 7,175 ✓ ☐ Measu Estima	Type of Dischargered ⊠ Continuous
	Flow Typ	estimated di pe Ave Process:	ischarge flow rate erage Flow Rate (, a verifiable basis GPD) Measure Estimate	for the estimate Maximum Flod 197	shall be provided. ow Rate (GPD) 7.175 ✓ ☐ Measu	Type of Dischargered ⊠ Continuous sted □ Batch
	Flow Tyr Regulated I	estimated di pe Ave Process:	131,450	A verifiable basis GPD) Measure Estimate Measure Measure Estimate Estimate	for the estimate Maximum Flet 197	shall be provided. ow Rate (GPD) 7,175	Type of Discharg red ☑ Continuous tted ☐ Batch red ☐ Batch red ☑ Continuous tted ☐ Batch red ☑ Continuous
	Flow Tyr Regulated I	r estimated di pe Ave Process: Process:	131,450	A verifiable basis GPD) X Measure Estimate Measure Estimate Measure	for the estimate Maximum Flet 197	shall be provided. ow Rate (GPD) 7,175	Type of Dischargened ⊠ Continuous ated □ Continuous ated □ Batch Batch □ Continuous ated □ Batch □ Batch □ Batch
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	Flow Tyr Regulated I Unregulated I D Provide the tot	r estimated di pe Ave Process: Process: illutional: Total: al facility disc From:	131,450 (138) 12,500 (143,950)	A verifiable basis GPD)	for the estimate Maximum Flet 197 1 18 215 the continued co	shall be provided. ow Rate (GPD) 7,175	Type of Discharg red ⊠ Continuous sted □ Batch red □ Continuous sted □ Batch red ☒ Continuous sted □ Batch
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REV 09/01/2013

	Facility Name: _	В	ELMO	NT PLA	TING '	WORK	(S, INC	D/	4# <u>111</u>	38-5	RD-115
3.	NATURE OF WA	STEWA	TER DISC	CHARGE:							
				TO BE	COMPLET	ED BY AL	L FACILITI	<u>ES</u>			
a.	Sampling Point: _	2A	No	te: A separ	ate page sh	all be pro	vided for ea	ch sampling	point, as ne		
b.	Categorically regula	ted proc	ess dischar	rge? ⊠	Yes 🗆 No	o If Y	es: 40 CF	_R 41	340 (CFR	433
Ç.					COMPOS	ITE SAM	PLES			••	
	Indicate method	· ·	· ·		Flow-Propor	tional [☑ Time-Base	ed T		Ī	
	Sampling Dates	From:		12/03/2013					Average	Pollutant C	oncentration Limits
		To:		12/04/2013					for Sampling	Daily	<u>Liitikş</u>
	Composite Duration (hours):	24HOUR	24HOUR	24HOUR				Period	Maximum	Average
	Pollutants		-0.05		Sampling Re	esults (mg/l	<u>-)</u>	1	(mg/L)	(mg/L)	(mg/L)
	CADMIUN		<0.05	<0.05	<0.05				<0.05	0.94	0.39
	CHROMIUM-T		0.15	0.14	0.15				0.15	5.78	2.17
	COPPER		0.29	0.12	0.19				0.20	3.00 250.00	1.69
	IRON		0.28	0.15	0.12				<0.05		0.29
	LEAD	,	<0.05	<0.05 <0.0002	<0.05				<0.0002	0.50	0.0005
	MERCUR	Y				<u>-</u>					
	NICKEL		0.05	0.05	<0.05				0.05	3.74	1.74
	SILVER		<0.05	<0.05	<0.05			<u> </u>	<0.05	0.39	0.22
	TOTAL META	ALS	0.81	0.82	0.92		-	<u> </u> 	0.85	9.63	4.59
	ZINC		0.32	0.51	0.53		-	<u> </u>	0.45	3.61	1.60
							-				
						_	+				
						<u> </u>					<u> </u>
											<u> </u>
				<u> </u>				<u> </u>			<u> </u>
					GRAE	SAMPLE	<u>s</u>		1		
										Pollutant C	concentration

			GRAB	SAMPLES	<u> </u>				
Sampling Date:	12/02/2013	12/03/2013	12/04/2013				Average for	Pollutant Concentration (DA) Limits	
Sample Collection Time:	7:00AM	7:00AM	7:00AM				Sampling Period	Daily Maximum	Average
Pollutants	Sampling Results (mg/L)				(mg/L)	(mg/L)	(mg/L)		
CHROMIUM(HEXAVALENT)	NR	NR	NR					10.0	-
CHROMIUM-TOTAL	0.16	0.16	0.29				0.20	5.78	2.17
CYANIDE-TOTAL	0.14	0.07	<0.05	_			0.09	1.64	0.52
F.O.G.	<5.0	<5.0	<5.0					250	-
pН	7.24	7.74	7.06				***	5-10	

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PAGE	_	OF	•	

	Facility Name: BELMON I	PLATING WO	RKS, INC DA#	11138-5 RD-115
4.	Continued Compliance Report (RD-115) pre CHRISTINA HAYES NAME OF PREPARER	SCIENTIFIC CONTRO	OL LABORATORIES, INC OF PREPARER	773-254-2406 TELEPHONE NUMBER
4.	CERTIFIED STATEMENT:			
a.	The signatory to this report, who shall be an applicable pretreatment discharge standard		ve of the industrial user, certific are not being met.	es that on a consistent basis all
b.	If applicable pretreatment discharge standa additional operation and maintenance, and	rds are not being met on / or additional pretreatm	a consistent basis, the signatoent,	ory to this report certifies that e not required.
c.	If applicable pretreatment discharge standa Schedule (RD-112) shall be submitted, together.	rds are not being met on ether with this report, to t	a consistent basis, a properly he District.	completed Compliance
Т	HE REPORT SHALL BE SIGNED BY A ADEQUATE COMPLETION AND REV			
up ve or t	ertify under penalty of law that this pervision in accordance with a systuluate the information submitted. Bathose persons directly responsible for knowledge and belief, true, accuration, including the control of the	em designed to as ased on my inquiry or gathering the info te, and complete.	sure that qualified perso of the person or persons rmation, the information s I am aware that there as	onnel properly gather and who manage the system, submitted is, to the best of re significant penalties for
			M	2
(Signed and sworn to or affirmed to) before me on	14,2014 by	MARK	PRESENTATIVE (Type or Print)
	OFFICIAL SEAL JANNE RICHARDSON NOTINEY PUBLIC - STATE OF ELIMOS MY COMMISSION SIPPING 1469/14		Jamnekic	DEC REPRESENTATIVE NATARY PUBLIC
Fo	r District use only:		<u> </u>	
	nte Submitted (Postmark): 4/15/201	<u>u</u>		
		<u> </u>		
	May Cale E	TITLE	4/24/20/4 In C	ompliance: 🗹 Yes 🔲 No



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TTO CERTIFICATION STATEMENT:

Based on my inquiry of the person or persons directly responsible for managing compliance with the permit limitation [or pretreatment standard] for total toxic organics (TTO), I certify that, to the best of my knowledge and belief, no dumping of concentrated toxic organics into the wastewaters has occurred since filing of the last discharge monitoring report [or continued compliance report]. I further certify that this facility is implementing the toxic organic management plan submitted to the permitting [or control] authority.

TOXIC ORGANIC MANAGEMENT PLAN:

I. Applicability

This facility has reviewed all current MSDS and has determined that this facility does not store or use any toxic organics that are listed in 40 CFR Part 433.11 and our Discharge Authorization. Therefore, no management procedures are necessary.

II. Follow-Up Review

Semi-Annually, <u>BELMONT PLATING WORKS</u>, <u>INC.</u>, will review all MSDS for any new materials brought into the facility to ensure that none of the toxic organics listed in 40 CFR Part 433.11 are present at the facility. If based on this review it is determined that there are listed toxic organics present at the plant this TOMP will be revised to develop management practices specifically designed to prevent these toxic organics from entering the sewer system. This revised TOMP will then be submitted to the MWRD for review and approval.

SIGNED <

TITLE

DATE



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SAMPLING CERTIFICATION STATEMENT

As an authorized representative of **Belmont Plating Works**, I certify that to the best of my knowledge and belief, the samples submitted to Scientific Control Laboratories, Inc. and reported in Laboratory Report Numbers **2013-120106** were taken in accordance with 40 CFR Part 403 and are representative of normal work cycles and expected pollutant discharge to the sewer system.

PH SAMPLING CERTIFICATION STATEMENT:

I certify that all pH samples were taken in accordance with Standard Methods 4500H+B (as specified in 40 CFR Part 136), using a calibrated pH meter immediately upon collection.

SIGNED **Z**

TITLE

DATE



CONTINUED COMPLIANCE METER READING LOG SHEET

Water Meter Readings:

Tracel Meter INGRALING	<u> </u>	<u> </u>			
Meter Location:	Building (BUILDING 3	Boiler		
Units: (Circle One)	Gal or CuFt	Gal or CuFt	Gal or CuFt	Gal or CuFt	Gal or CuFt
DAY 1 - START 12_02_13	14,970 7277270	2589065	41043 -00	14,970 +2,801=	17,771 × 7.48=
DAY 1 - END 1-2031-5	7292240	2591866	41143-00		132,927 gal.
DAY 2 - START	F292240	2591866	41145-00	16,920 + 1,770	= 18,699 x 7.48=
DAY 2 - END	7309160	2593645			139,868 gal.
DAY 3 - START 12 - 041 - 13	7309160	2593645	41238-00	15,160+2,720	= 17,380 x 7.48
DAY 3 - END 12 - 05 - 13	7324770	2395865			130,002 gal
Notes:					-
<u></u>		<u> </u>			

Please read all your city water meters and sub-meters at the start and end of each day of sampling. Copy all numbers, including zeros (even fixed/painted zeros).